

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/798,442 FILING DATE \_\_\_\_\_  
APPLICANT(S) \_\_\_\_\_

372-04		CLAIMS					
AS-FEED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
IND.	DER.	IND.	DER.	IND.	DER.	IND.	DER.
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TOTAL IND.	2						
TOTAL DER.	32						
TOTAL CLAIMS	34						

51							
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TOTAL IND.							
TOTAL DER.							
TOTAL CLAIMS							

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS